

POS000026862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

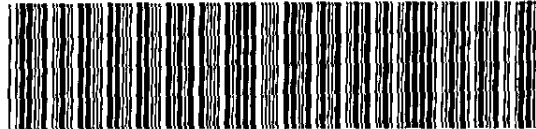
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/14/05--01059--004 **78.75

05 FEB 16 PM 2:20
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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 02/14/05 BY 60300

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: M PLUS E INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: MICHELLE PELAGE
Name (Printed or typed)

2237 N. SEACREST BLVD.
Address

DELRAY BEACH FL. 33444
City, State & Zip

954-791-0609 CELL: 305-318-5209
Daytime Telephone number

PLEASE

N.B. SEND IT FOR ME AT THIS HOUSE address:

MICHELLE PELAGE
5216 RISING COMET LN.
GREENACRES FL. 33463

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

M PLUS E INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2237 N. SEACREST BLVD.
DELRAY BEACH FL. 33444

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOOD MARKET

ARTICLE IV SHARES

The number of shares of stock is:

300 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MICHELLE PELAGE (OWNER)
5216 RISING COMET LN
GREENACRES FL. 33463

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ROSMANN EDUARD ELIZOR
5218 RISING COMET LN
GREENACRES FL. 33463

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHELLE PELAGE
5216 RISING COMET LN
GREENACRES FL. 33463

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Rosmann Edouard Elizor
Signature/Registered Agent

02-09-05
Date

Michelle Pelage
Signature/Incorporator

02-09-05
Date

05 FEB 14 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA